

Atty Docket No. 14572P-002865US

PTO FAX NO.: 703-872-9306

ATTENTION: Examiner Suzanne L.D. Barrett
PTO PHONE: 703-308-0825

Group Art Unit 3676

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Suzanne L.D. Barrett

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of William R. Murray, Jr., Application No. 09/804,973, filed March 13, 2001 for COMPUTER PHYSICAL SECURITY DEVICE are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal-1 Page
2. Fee Transmittal-In Duplicate
3. Amendment-15 Pages

Number of pages being transmitted, including this page: 19

Dated: March 4, 2005


Patrick R. Jewik

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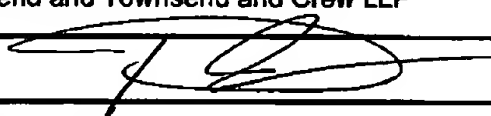
TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834
Telephone: 415-576-0200
Fax: 415-576-0300

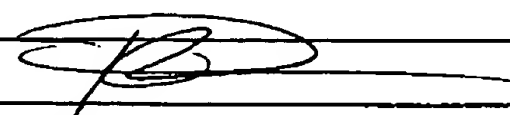
60436128 v1

PTO/SB/21 (09-04)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/804,973	
	Filing Date	March 13, 2001	
	First Named Inventor	Murray, William R.	
	Art Unit	3676	
	Examiner Name	Suzanne L.D. Barrett	
Total Number of Pages in This Submission	18	Attorney Docket Number	14572P-002865US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Request for Refund	
	<input type="checkbox"/> CD, Number of CD(s) _____	
	<input type="checkbox"/> Landscape Table on CD	
Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Patrick R. Jewik		
Date	3-4-05	Reg. No.	40,456

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name	Patrick R. Jewik	Date	3-4-05

60436125 v1

PTO/SB/17 (12-04)

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1200

Complete if Known

Application Number	09/804,973
Filing Date	March 13, 2001
First Named Inventor	Murray, William R.
Examiner Name	Suzanne L.D. Barrett
Art Unit	3676
Attorney Docket No.	14572P-002865US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
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FEE CALCULATION
1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Small Entity	Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25	
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100	
Multiple dependent claims	360	180	

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
39	-20 or HP = 0	x \$50	= \$0			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
17	-3 or HP = 6	x \$200	= \$1,200			

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

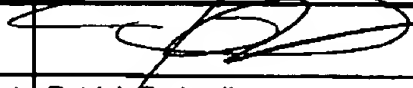
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 40,456	Telephone 415-576-0200
Name (Print/Type)	Patrick R. Jewik		Date 3/4/05

60436122 v1

PTO/SB/17 (12-04)

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$1200)

Complete If Known

Application Number	09/804,973
Filing Date	March 13, 2001
First Named Inventor	Murray, William R.
Examiner Name	Suzanne L.D. Barrett
Art Unit	3676
Attorney Docket No.	14572P-002865US

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☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
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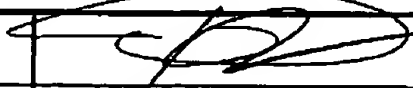
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4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	40,456	Telephone	415-576-0200
Name (Print/Type)	Patrick R. Jewik			Date	3/4/05

60436122 v1

MAR 04 2005

I hereby certify that this correspondence is being faxed to the USPTO on
March 4, 2005.

TOWNSEND and TOWNSEND and CREW LLP

By: 

PATENT
Attorney Docket No.: 14572P-002865US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

William R. Murray, Jr.

Application No.: 09/804,973

Filed: March 13, 2001

For: COMPUTER PHYSICAL
SECURITY DEVICE

Customer No.: 20350

Confirmation No. 2624

Examiner: Suzanne L.D. Barrett

Technology Center/Art Unit: 3676

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed on February 28, 2005, please enter the
following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this
paper.

Remarks/Arguments begin on page 14 of this paper.